NorthShore University HealthSystem

Office of Finance

1301 Central Street
Evanston, IL 60201
www.northshore.org

(847) 570-5065
(847) 570-5240 Fax

May 22, 2019

Ms. Kathy Olson
Illinois Health Facilities and Services Review Board
525 West Jefferson Street, 2nd Floor
Springfield, IL 62761

RECEIVED
MAY 23 2019
HEALTH FACILITIES & SERVICES REVIEW BOARD

SUBJECT: Project #: 13-075 Highland Park Hospital
Annual Progress Report
Project Title: Highland Park Hospital Major Modernization Project
Permit Holder: NorthShore University Health System, 1301 Central, Evanston, Illinois 60201

Dear Ms. Olson:

This is our 5th annual progress report for the above project.

The scope and financing of the project remains as outlined in the CON Application approved by the Illinois Health Facilities and Services Review Board.

Costs incurred through May 22, 2019 total $68,903,836.87. The attached spreadsheet outlines these costs by category and provides projections to the project's completion.

The project is on schedule to be completed by June 30, 2019.

- The Radiology West addition is completed.
- The Radiology Renovation is Complete and Occupied.
- Phase 1, 2, 3 and 4 of the Surgery Pavilion are complete.
- Phase 5 should be complete by June 30, 2019.

The project remains on schedule as outlined in the application.

The required AIA forms G707s are attached.

If we can provide you any further information at this time, please contact me at 847 492-6904 or via e-mail at JAaron@northshore.org.

Sincerely,

John Aaron
Senior Director, Finance Group
NorthShore University HealthSystem

State of Illinois
County of Cook
Signed before me on May 22, 2019
by John Aaron.

Ellen Daniel
Notary Public

OFFICIAL SEAL
ELLEN DANIEL
NOTARY PUBLIC - STATE OF ILLINOIS
MY COMMISSION EXPIRES:11/16/19

Integrated Facilities Solutions, Inc.

May 22, 2019

John Aaron
Senior Director, Asset Managementt Department
NorthShore University HealthSystem
1301 Central Street
Evanston, IL 60201

Re: Annual progress report - CON 13-075 Highland Park Hospital - Major modernization project including new construction of clinical/non-clinical areas

Dear Mr. Aaron,

On behalf of NorthShore University HealthSystem, Integrated Facilities Solutions, Inc, (IFS) has reviewed the above CON project.

Based on the records provided by NorthShore, dated May 22, 2019 the actual costs paid to date on the above project is $64,571,339.87 in direct project costs and $4,332,497.00 in capital equipment costs for a total expenditure of $68,903,836.87. The attached spreadsheet outlines the project costs by category and provides projections to the project's completion. We have confirmed that the direct project cost of $64,571,339.87 spent as of the above date accord with IFS records.

The project is on schedule to be completed by June 30, 2019. The Radiology West addition is completed. The Radiology Renovation is Complete and Occupied. Phase 1, 2, 3 and 4 of the Surgery Pavilion are complete. Phase 5 should be completed by June 30, 2019.

Sincerely,

Angelo Roncone
President
Integrated Facilities Solutions, Inc.

Integrated Facilities Solutions, Inc.

Project Number: 13-075
Project Title: 13-075 Highland Park Hospital Major Modernization Project
Subject: Annual C.O.N. Progress Report
Permit Holder: NorthShore University HealthSystem
Date: May 22 2019

	Projected	Total Costs Incurred as of: 5/22/2019	Available Balance as of 5/22/2019	Estimated Costs to Completion	Variance From Approved
Preplanning Costs	$ 735,000.00	$ 688,594.31	$ 46,405.69	$ -	$ 46,405.69
Site Survey & Soil Investigation	$ 50,000.00	$ 46,963.80	$ 3,036.20	$ -	$ 3,036.20
Site Preparation	$ 937,900.00	$ 1,043,657.68	$ (105,757.68)	$ -	$ (105,757.68)
Off-site Work	$ 955,000.00	$ 273,789.07	$ 681,210.93	$ -	$ 681,210.93
New Construction Contracts	$ 19,101,930.00	$ 22,737,310.92	$ (3,635,380.92)	$ -	$ (3,635,380.92)
Modernization Contracts	$ 20,189,345.00	$ 19,064,501.54	$ 1,124,843.46	$ 230,000.00	$ 894,843.46
Contingencies	$ 1,729,890.00		$ 1,729,890.00	$ 150,000.00	$ 1,579,890.00
Architectural/Engineering Fees	$ 3,577,761.00	$ 3,588,980.33	$ (11,219.33)	$ -	$ (11,219.33)
Consulting and Other Fees	$ 4,184,000.00	$ 5,128,532.96	$ (944,532.96)	$ 100,000.00	$ (1,044,532.96)
Movable or Other Equipment	$ 21,508,895.00	$ 15,772,483.71	$ 5,736,411.29	$ 50,000.00	$ 5,686,411.29
Other Costs to be Capitalized	$ 525,000.00	$ 559,036.75	$ (34,036.75)	$ -	$ (34,036.75)
Total	$ 73,494,721.00	$ 68,903,851.07	$ 4,590,869.93	$ 530,000.00	$ 4,060,869.93

Cash and Securities	$ 73,494,721.00
Pledges	
Gifts and Bequests	
Bond Issues (project related)	
Mortgages	
Leases (fair market value)	
Governmental Appropriations	
Grants	
Other Funds and Sources	
TOTAL FUNDS	$ 73,494,721.00

Integrated Facilities Solutions, Inc.

Commitment Invoices Report

Project	Total Invoiced
061024 - HP Surgery Pavilion	$50,734,228.53
090709 - HP Radiology Remodel	$5,516,261.72
140303 - HP Radiology West Addition & Phase 1	$8,364,650.23
	$64,615,140.48

CON Category	Total Invoiced
01 - Pre-Planning	$688,594.31
2 - Site Survey & Soil Investigation	$46,963.80
03 - Site Preparation	$1,043,657.68
04 - Off-Site Work	$273,789.07
05 - New Construction	$22,737,310.92
06 - Modernization Contracts	$19,064,501.54
08 - Architect/Engineering Fees	$3,588,980.33
09 - Consulting and Other Fees	$5,128,532.96
10 - Moveable or Other Equipment	$15,772,483.71
11 - Other Costs to be Capitalized	$559,036.75
Total	**$68,903,851.07**

APPLICATION AND CERTIFICATE FOR PAYMENT

TO OWNER: NorthShore University HealthSystem
2650 Ridge Avenue
Evanston, IL
60201

PROJECT: Highland Park Hospital Surgery Pavilion
2650 Ridge Avenue
Evanston, IL
60201-0000 US

APPLICATION NO.:49
PERIOD TO :30-APR-19
PROJECT NOS.:1401610
INVOICE NO.1401610049

CONTRACT DATE :06-AUG-14

Distribution to:
- ☐ OWNER
- ☐ ARCHITECT
- ☐ CONTRACTOR
- ☐
- ☐

FROM CONTRACTOR: Pepper Construction Company
411 Lake Zurich Road
Barrington, IL , 60010-3141

ARCHITECT:

CONTRACT FOR: Highland Park Hospital Surgery Pavilion

CONTRACTOR'S APPLICATION FOR PAYMENT

Application is made for payment, as shown below, in connection with the Contract. Continuation sheet is attached.

1. ORIGINAL CONTRACT SUM	$	27,677,288.00
2. Net change by change orders	$	4,946,587.00
3. CONTRACT SUM TO DATE (Line1 +/- 2)	$	32,623,875.00
4. TOTAL COMPLETED & STORED TO DATE (Column G on G703)	$	32,449,526.74
5. RETAINAGE: Total retainage Column I of G703)	$	449,798.02
6. TOTAL EARNED LESS RETAINAGE (Line 4 less Line 5 Total)	$	31,999,728.72
7. LESS PREVIOUS CERTIFICATES FOR PAYMENT (Line 6 from prior Certificate)	$	31,961,224.97
8. CURRENT PAYMENT DUE	$	38,503.75
9. BALANCE TO FINISH, INCLUDING RETAINAGE (Line 3 less Line 6)	$	624,146.28

CHANGE ORDER SUMMARY		ADDITIONS	DEDUCTIONS
Change Order approved in previous months by Owner		5,048,436.00	-101,849.00
APPROVED THIS MONTH			
Number	Date Approved		
CURRENT TOTAL		0.00	0.00
Net Change by Change Orders			4,946,587.00

The undersigned Contractor certifies that to the best of the Contractor's knowledge, information and belief the work covered by this Application for Payment has been completed in accordance with the Contract Documents, that all amounts have been paid by the Contractor for Work for which previous Certificates for payment were issued and payments received from the Owner, and that current payment shown herein is now due.

Contractor : Pepper Construction Company

By : Date : 4-18-19

State of : Illinois

County of : Lake

Subscribed and sworn to before me this 12th day of April 20

Notary Public:

My Commission expires: 08/23/

OFFICIAL SEAL
NOTARY PUBLIC, STATE OF ILLINOIS
MY COMMISSION EXPIRES

ARCHITECT'S CERTIFICATE FOR PAYMENT

In accordance with the Contract Documents, based on on-site observations and the data comprising the above application, the Architect certifies to the Owner that to the best of the Architect's knowledge, information and belief the Work has progressed as indicated, the quality of Work is in accordance with the Contract Documents, and the Contractor is entitled to the payment of the AMOUNT CERTIFIED.

AMOUNT CERTIFIED..$ 38,503.75

(Attach explanation if amount certified differs from the amount applied for. Initial figures on this Application and on the Continuation Sheet that are changed to conform to the amount certified.)

ARCHITECT:

By: Date : 4/25/2019

This Certificate is not negotiable. The AMOUNT CERTIFIED is payable only to the Contractor named herein. Issuance, payment and acceptance of payment are without prejudice to any rights of the Owner or Contractor under this Contract.

APPLICATION AND CERTIFICATE FOR PAYMENT

TO OWNER: Northshore University HealthSystem
2650 Ridge Avenue
Evanston, IL
60201

PROJECT: NUH - Highland Park Hospital Radiology Renovation
2650 Ridge Avenue
Evanston, IL
60201-0000 US

FROM CONTRACTOR: Pepper Construction Company
411 Lake Zurich Road
Barrington, IL , 60010-3141

ARCHITECT:

APPLICATION NO.:20
PERIOD TO :30-NOV-17
PROJECT NOS.:1401888
INVOICE NO.1401888020

CONTRACT DATE :10-FEB-15

Distribution to:
- ☐ OWNER
- ☐ ARCHITECT
- ☐ CONTRACTOR
- ☐
- ☐

CONTRACT FOR: NUH - Highland Park Hospital Radiology Re

CONTRACTOR'S APPLICATION FOR PAYMENT

Application is made for payment, as shown below, in connection with the Contract. Continuation sheet is attached.

1. ORIGINAL CONTRACT SUM	$	3,794,396.00
2. Net change by change orders	$	349,040.00
3. CONTRACT SUM TO DATE (Line1 +/- 2)	$	4,143,436.00
4. TOTAL COMPLETED & STORED TO DATE (Column G on G703)	$	4,143,436.00
5. RETAINAGE: Total retainage Column I of G703)	$	0.00
6. TOTAL EARNED LESS RETAINAGE (Line 4 less Line 5 Total)	$	4,143,436.00
7. LESS PREVIOUS CERTIFICATES FOR PAYMENT (Line 6 from prior Certificate)	$	3,765,635.25
8. CURRENT PAYMENT DUE	$	377,800.75
9. BALANCE TO FINISH, INCLUDING RETAINAGE (Line 3 less Line 6)	$	0.00

CHANGE ORDER SUMMARY		ADDITIONS	DEDUCTIONS
Change Order approved in previous months by Owner		260,640.00	0.00
APPROVED THIS MONTH			
Number	Date Approved		
0000003	19-OCT-2017	88,400.00	
CURRENT TOTAL		88,400.00	0.00
Net Change by Change Orders			349,040.00

The undersigned Contractor certifies that to the best of the Contractor's knowledge, information and belief the work covered by this Application for Payment has been completed in accordance with the Contract Documents, that all amounts have been paid by the Contractor for Work for which previous Certificates for payment were issued and payments received from the Owner, and that current payment shown herein is now due.

Contractor : Pepper Construction Company

By: [signature] Date : 11-21-17

State of : IL

County of : Cook

Subscribed and sworn to before me this 21 day of November

Notary Public: [signature]

My Commission expires: 1/31/21

OFFICIAL SEAL
JANICE ALVARADO
NOTARY PUBLIC, STATE OF ILLINOIS
MY COMMISSION EXPIRES 1/31/2021

ARCHITECT'S CERTIFICATE FOR PAYMENT

In accordance with the Contract Documents, based on on-site observations and the data comprising the above application, the Architect certifies to the Owner that to the best of the Architect's knowledge, information and belief the Work has progressed as indicated, the quality of Work is in accordance with the Contract Documents, and the Contractor is entitled to the payment of the AMOUNT CERTIFIED.

AMOUNT CERTIFIED ....$ 377,800.75

(Attach explanation if amount certified differs from the amount applied for. Initial figures on this Application and on the Continuation Sheet that are changed to conform to the amount certified.)

ARCHITECT:

By: [signature] Date : 11/22/2017

This Certificate is not negotiable. The AMOUNT CERTIFIED is payable only to the Contractor named herein. Issuance, payment and acceptance of payment are without prejudice to any rights of the Owner or Contractor under this Contract.

APPLICATION AND CERTIFICATE FOR PAYMENT

TO OWNER: Northshore University HealthSystem
2650 Ridge Avenue
Evanston, IL
60201-0000

PROJECT: Highland Park Hospital West Addition & OR Building
2650 Ridge Avenue
Evanston, IL
60201-0000 US

FROM CONTRACTOR: Pepper Construction Company
411 Lake Zurich Road
Barrington, IL , 60010-3141

ARCHITECT:

CONTRACT FOR: Highland Park Hospital West Addition & OR

APPLICATION NO.:17
PERIOD TO :30-JUN-16
PROJECT NOS.:1108874
INVOICE NO.1108874017

CONTRACT DATE :09-JUL-14

Distribution to:
- [ ] OWNER
- [ ] ARCHITECT
- [ ] CONTRACTOR
- [ ]
- [ ]

CONTRACTOR'S APPLICATION FOR PAYMENT

Application is made for payment, as shown below, in connection with the Contract. Continuation sheet is attached.

1. ORIGINAL CONTRACT SUM	$	7,646,955.00
2. Net change by change orders	$	235,030.00
3. CONTRACT SUM TO DATE (Line1 +/- 2)	$	7,881,985.00
4. TOTAL COMPLETED & STORED TO DATE (Column G on G703)	$	7,881,985.00
5. RETAINAGE: Total retainage Column I of G703)	$	0.00
6. TOTAL EARNED LESS RETAINAGE (Line 4 less Line 5 Total)	$	7,881,985.00
7. LESS PREVIOUS CERTIFICATES FOR PAYMENT (Line 6 from prior Certificate)	$	7,495,580.78
8. CURRENT PAYMENT DUE	$	386,404.22
9. BALANCE TO FINISH, INCLUDING RETAINAGE (Line 3 less Line 6)	$	0.00

CHANGE ORDER SUMMARY		ADDITIONS	DEDUCTIONS
Change Order approved in previous months by Owner		454,225.00	0.00
APPROVED THIS MONTH			
Number	Date Approved		
0000003	05-MAY-2016	0.00	219,195.00
CURRENT TOTAL		0.00	219,195.00
Net Change by Change Orders			235,030.00

The undersigned Contractor certifies that to the best of the Contractor's knowledge, information and belief the work covered by this Application for Payment has been completed in accordance with the Contract Documents, that all amounts have been paid by the Contractor for Work for which previous Certificates for payment were issued and payments received from the Owner, and that current payment shown herein is now due.

Contractor : Pepper Construction Company

By: ____________ Date : 6-23-16

State of : Illinois

County of : Cook

Subscribed and sworn to before me this 23 day of June

Notary Public: ____________

My Commission expires: 7-27-2019

ARCHITECT'S CERTIFICATE FOR PAYMENT

In accordance with the Contract Documents, based on on-site observations and the data comprising the above application, the Architect certifies to the Owner that to the best of the Architect's knowledge, information and belief the Work has progressed as indicated, the quality of Work is in accordance with the Contract Documents, and the Contractor is entitled to the payment of the AMOUNT CERTIFIED.

AMOUNT CERTIFIED..$ 386,404.22

(Attach explanation if amount certified differs from the amount applied for. Initial figures on this Application and on the Continuation Sheet that are changed to conform to the amount certified.)

ARCHITECT:

By: ____________ Date : 6/24/2016

This Certificate is not negotiable. The AMOUNT CERTIFIED is payable only to the Contractor named herein. Issuance, payment and acceptance of payment are without prejudice to any rights of the Owner or Contractor under this Contract.